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STATEMENT OF **ORGANIZATION**

SECRETARY OF THE SENATE

FORIVI I			15 DEC 15 PA 1: 4/
		·	Office Use Only
NAME OF COMMITTEE (in full)	(Check if name is changed)	Example: If typing, type over the lines.	12FE4M5
Fleming for Louisiana		<u> </u>	
ADDRESS (number and street)	P.O. Box 1352		
☐		<u> </u>	
	Minden CITY ▲		LA 71055 - ZIP CODE ▲
COMMITTEE'S E-MAIL ADDRE	SS		
(Check if address is changed)	outsourcing@aristotl	e.com	
	Optional Second E-Mail Add	dress	
COMMITTEE'S WEB PAGE ADD	DRESS (URL)		
☐ ◀ (Check if address is changed)	www.Flemingforla.co	m, , , , , , , , , , , , , , , , , , ,	<u> </u>
· ·	1		
2. DATE $\begin{bmatrix} 12 \\ 12 \end{bmatrix}$	2015		
3. FEC IDENTIFICATION NU	IMBER ▶ [C]		
4. IS THIS STATEMENT	NEW (N) OR	AMENDED (A)	
I certify that I have examined th	is Statement and to the best	of my knowledge and belief it is	true, correct and complete.
Type or Print Name of Treasurer	<u>Susan Shaw</u>		
Signature of Treasurer	isanShaw		Date [12] [09] 2015
NOTE: Submission of false, errone		may subject the person signing this	s Statement to the penalties of 52 U.S.C. §30109. THIN 10 DAYS.
Office Use Only		For further information con Federal Election Commission Toll Free 800-424-9530	

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			DMMITTEE Committee:						
	(a)	\boxtimes	This committee is a principal campaign committee. (Complete the candidate information below.)						
(b)			This committee is an authorized committee, and is NOT a principal campaign committee. (Complete the candidate information below.)						
	Name Candi		John C. Fleming, Jr.						
	Candi Party	date Affiliatio	n REP Office State REP Sought: House X Senate President District						
(c)		This committee supports/opposes only one candidate, and is NOT an authorized committee.						
	Name Candid								
i	Party	y Com	mittee:						
(d)		This committee is a (National, State or subordinate) committee of the Republican, etc.) Party.						
F	Politi	ical Ac	etion Committee (PAC):						
(e)		This committee is a separate segregated fund. (Identify connected organization on line 6.) Its connected organization is a:						
			Corporation Corporation w/o Capital Stock Labor Organization						
			Membership Organization Trade Association Cooperative						
			In addition, this committee is a Lobbyist/Registrant PAC.						
(f)		This committee supports/opposes more than one Federal candidate, and is NOT a separate segregated fund or party committee. (i.e., nonconnected committee)						
			In addition, this committee is a Lobbyist/Registrant PAC.						
			In addition, this committee is a Leadership PAC. (Identify sponsor on line 6.)						
J	oint	Fundr	aising Representative:						
(g)		This committee collects contributions, pays fundraising expenses and disburses net proceeds for two or more political committees/organizations, at least one of which is an authorized committee of a federal candidate.						
(h)		This committee collects contributions, pays fundraising expenses and disburses net proceeds for two or more political committees/organizations, none of which is an authorized committee of a federal candidate.						
		Comm	nittees Participating in Joint Fundraiser						
		1.	FEC ID number C						
		2.	FEC ID number C						
		3.	FEC ID number C						
		4. <u>[</u>	FEC ID number						
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FEC Form 1 (Revised	02/2009)	Page 3
Write or Type Committee Nam	е	, <u></u>
6. Name of Any Connected	Organization, Affillated Committee, Joint Fundralsing Representative, or Leade	rship PAC Sponsor
Fleming for Congress		
Mailing Address	P.O. Box 1236	
	Minden	8
	CITY STATE	ZIP CODE
Relationship: Connecte	d Organization XAffiliated Committee JJoint Fundraising Representative JL	eadership PAC Sponso.
 Custodian of Records: Ide books and records. 	ntify by name, address (phone number optional) and position of the person in p	ossession of committee
Full Name Susan	Shaw	1 1 1 1 1
Mailing Address	119 Homer Road	
	Minden LA 7105	55
Title or Position	CITY STATE	ZIP CODE
Treasurer	Telephone number 318 -	377 - 6665
3. Treasurer: List the name an any designated agent (e.g.,	d address (phone number optional) of the treasurer of the committee; and the nassistant treasurer).	ame and address of
Full Name of Treasurer Susan S	haw , , , , , , , , , , , , , , , , , , ,	
Mailing Address	119 Homer Road	
	Minden LA 71055 CITY STATE	ZIP CODE
Title or Position Treasurer		377 ₁] - <u>[666</u> 5 _{1]}

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K. MACCALLUM PERINTENDENT 05/55 -03/55 -2 0C 3 12/0-21 NYLE 02: 12/0-21

United States Senate

OFFICE OF THE SECRETARY

OFFICE OF PUBLIC RECORDS

THE PRECEDING DOCUMENT WAS:
THE PRECEDING DOCUMENT WAS: HAND DELIVERED Date-of Receipt
USPS FIRST CLASS MAIL Date of Receipt Postmark
USPS REGISTERED/CERTIFIED Postmark
USPS PRIORITY MAIL Postmark
DELIVERY CONFIRMATION OR SIGNATURE CONFIRMATION LABEL
USPS EXPRESS MAIL Postmark
OVERNIGHT DELIVERY SERVICE: SHIPPING DATE NEXT BUSINESS DAY DELIVERY
FEDERAL EXPRESS
UPS
DHL
AIRBORNE EXPRESS
RECEIVED FROM FEDERAL ELECTION COMMISSION
POSTMARK ILLEGIBLE POSTMARK
FAX
Date of Receipt
OTHER
Date of Receipt or Postmark DATE PREPARED DATE PREPARED

Hand Delivered



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